

REGIONAL MEDICAL PROGRAMS

The initial concept of Regional Medical Programs was to provide a vehicle by which scientific knowledge could be more readily transferred to the providers of health services and, by so doing, improve the quality of care provided with a strong emphasis on heart disease, cancer, stroke, and related diseases.

The implementation and experience of RMP over the past five years, coupled with the broadening of the initial concept especially as reflected in the most recent legislation extension, has clarified the operational premise on which it is based -- namely, that the providers of care in the private sector, given the opportunities, have both the innate capacity and the will to provide quality care to all Americans.

Given this premise, the purpose of this statement is to specify

(1) what Regional Medical Programs are, (2) what their evolving mission
has become, and (3) the basis on which they will be judged.

RMP -- The Mechanism

RMP is a functioning and action-oriented consortium of providers responsive to health needs and problems. It is simed at doing things which must be done to resolve those problems.

RMP is a framework or organization within which all providers can come together to meet health needs that cannot be met by individ-

ual practitioners, health professionals, hospitals and other institutions acting alone. It also is a structure deliberately designed to take into account local resources, patterns of practice and referrals, and needs. As such it is a potentially important force for bringing about and assisting with changes in the provision of personal health services and care.

RMP also is a way or process in which providers work together in a structure which offers them considerable flexibility and autonomy in determing what it is they will do to improve health care for their communities and patients, and how it is to be done. As such, it gives the health providers of this country an opportunity to exert leadership in addressing health problems and needs and provides them with a means for doing so. RMP places a great corollary responsibility upon providers for the health problems and needs which they must help meet are of concern to and affect all the people.

RMP -- The Mission

RMP shares with all health groups, institutions, and programs, private and public, the broad, overall goals of (1) increasing availability of care, (2) enhancing its quality, and (3) moderating its costs -- making the organization of services and delivery of care more efficient.

Among government programs RMP is unique in certain of its salient characteristics and particular approaches. Specifically:

- (1) RMP is primarily linked to and works through providers, especially practicing health professionals; this means the private sector largely.
- (2) RMP essentially is a voluntary approach drawing heavily upon existing health resources.
- (3) Though RMP continues to have a categorical emphasis, to

 be effective that emphasis frequently must be subsumed within

 or made subservient to broader and more comprehensive ap
 proaches.

It is these broad, shared goals on the one hand and the characteristics and approaches unique to RMP on the other, that shape its more specific mission and objectives. The principal of these are to:

- (1) Promote and demonstrate among providers at the local level both new techniques and innovative delivery patterns for improving the accessibility, efficiency, and effectiveness of health care. At this time the latter would include, for example, encouraging provider acceptance of and extending resources supportive of Health Maintenance Organizations.
- existing health manpower to provide more and better care and will result in the more effective utilization of new kinds (or combinations) of health manpower. Further, to do this in a way that will insure that professional, scientific, and technical activities of all kinds (e.g., informational, training) do indeed lead to professional growth and development and are appropriately placed within the context of

medical practice and the community. At this time emphasis will be on activities which most effectively and immediately lead to provision of care in urban and rural areas presently underserved.

- (3) Encourage providers to accept and enable them to initiate regionalization of health facilities, manpower, and other resources so that more appropriate and better care will be accessible and available at the local and regional levels.

 In fields where there are marked scarcities of resources, such as kidney disease, particular stress will be placed on regionalization so that the costs of such care may be moderated.
- (4) Identify or assist to develop and facilitate the implementation of new and specific mechanisms that provide quality control and improved standards of care. Such quality guidelines and performance review mechanisms will be required especially in relation to new and more effective comprehensive systems of health services.

Even in its more specific mission and objectives, RMP cannot function in isolation, but only by working with and contributing to related Federal and other efforts at the local, state, and regional levels, particularly state and areawide Comprehensive Health Planning activities.

Moreover, to be maximally effective requires that most RMP-supported endeavors make adequate provision for continuation support once initial

Regional Medical Program grant support is terminated; that is, there generally must be assurance that future operating costs can be absorbed within the regular health care financing system within a reasonable and agreed upon period. Only in this way can RMP funds be regularly re-invested.

RMP -- The Measure

It follows that the measure of a Regional Medical Program, reflecting as it does both mission and mechanism, must take into account a variety of factors and utilize a number of criteria. The criteria by which RMP's will be assessed relate to (1) intended results of its program, (2) past accomplishments and performance, and (3) the structure and process developed by the RMP to date.

- A. Criteria relating to a Regional Medical Program's proposed program, and the intended or anticipated results of its future activities, will include:
 - (1) The extent to which they reflect a provider action-plan of high priority needs and are congruent with the overall mission and objectives of RMP.
 - (2) The degree to which new or improved techniques and knowledge are to be more broadly dispersed so that larger numbers of people will receive better care.
 - (3) The extent to which the activities will lead to increased utilization and effectiveness of community health facilities and manpower, especially new or existing kinds of allied health

- personnel, in ways that will alleviate the present maldistribution of health services.
- (4) Whether health maintenance, disease prevention, and early detection activities are integral components of the action-plan.
- (5) The degree to which expanded ambulatory care and out-patient diagnosis and treatment can be expected to result.
- (6) Whether they will strengthen and improve the relationship between primary and secondary care, thus resulting in greater continuity and accessibility of care.

There are, moreover, other program criteria of a more general character that also will be used. Specifically:

- (7) The extent to which more immediate pay-off in terms of accessibility, quality, and cost moderation, will be achieved by the activities proposed.
- (8) The degree to which they link and strengthen the ability of multiple health institutions and/or professions (as opposed to single institutions or groups) to provide care.
- (9) The extent to which they will tap local, state and other funds or, conversely, are designed to be supportive of other Federal efforts.
- B. Performance criteria will include:
- (1) Whether a region has succeeded in establishing its own goals, objectives, and priorities.

- (2) The extent to which activities previously undertaken have been productive in terms of the specific ends sought.
- (3) Whether and the degree to which activities stimulated and initially supported by RMP have been absorbed within the regular health care financing system.
- C. Process crimeria will include:
- (1) The viability and effectiveness of an RMP as a functioning organization, staff, and advisory structure.
- (2) The extent to which all the health related interests, institutions and professions of a region are committed to and actively participating in the program.
- (3) The degree to which an adequate functioning planning organization and endeavor has been developed in conjunction with CHP, at the local (or subregional) level.
- (4) The degree to which there is a systematic and ongoing identification and assessment of needs, problems, and resources; and how these are being translated into the region's continuously evolving plans and priorities.
- (5) The adequacy of the region's own management and evaluation processes and efforts to date in terms of feedback designed to validate, modify, or eliminate activities.